The Language of Recovery: “Making it Real” for Patients, Families and Colleagues

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APNA 25th Annual Conference
October 20, 2011

This speaker has no conflict of interest and nothing to disclose.

Learning Outcomes

Upon completion of this session, participants will be able to:

- define and analyze the term recovery in the context of mental health and mental illness.
- identify and define the components of the Recovery Model.
- explore and evaluate personal experience as a patient or family member in a healthcare setting.
- utilize reflective practice techniques to internally investigate, analyze and critically evaluate current belief systems and daily practice habits through the exploration of the language used to communicate in the professional setting.
- identify and evaluate the disparity between non-recovery and recovery focused language in the healthcare setting and how it affects patient care.
- translate the language of recovery into day to day care with patients and their loved ones.

Meaningful Connections

This program is part of a larger initiative introduced in April of 2010 at Sharp Mesa Vista Hospital entitled: Meaningful Connections

- Meaningful Connections is an initiative designed to:
  - introduce staff members to the Recovery Model
  - offer patients and staff members the opportunity to work, grow and heal using a recovery perspective
  - empower staff members to own their professional practice by demonstrating a willingness to reflect, analyze and adopt changes in collaboration with patients in their care.
  - stimulate a dialogue between and among staff members
  - identify and develop the skills required to deliver care based on the Recovery Model
  - transition staff members from paper based charting to EMR while maintaining a MEANINGFUL CONNECTION with their patients.

Step One: The Method

- Introduced “Meaningful Connections” (MC) as a part of the Electronic Medical Record (EMR) training.
- Strategically placed MC at the end of the EMR training to ensure retention of material.
- Utilized moderate sized groups (10-16 individuals) to promote a dialogue among members.

"Your vision will become clear only when you look into your heart. Who looks outside, dreams. Who looks inside, awakens." ~Carl Jung~
**Step Two: Reflective Practice**

- An evidence-based approach to promote personalized professional growth and responsibility.
- Involves thinking back on what you have done to discover how our knowing in action may have contributed to an unexpected or positive outcome.
- This practice serves to reshape what you are doing while you are doing it.

**Reflect**

- Ask the question:
  - How many of you have ever been a patient?
  - How many of you have had a family member or loved one in the hospital?
- Encourage exploration of the experience...
  - Tell us about that experience...the care, the feelings...the concerns...what worked...what didn't...etc.

**Our Training: The Medical Model**

- **Negative Terms**:
  - Focus is on the illness, rather than the person.
  - Emphasis: doing something FOR them.
  - Symptoms and complaints need to be eliminated.
  - Illnesses need to be cured or removed.
  - Patients need to be relieved of their conditions and returned to their baseline state.
  - Use of dehumanizing language: "the case" or "the borderline in room 206."

**Medical vs Recovery Model**

**Exclude**
- Professional distance
- Emotional detachment
- Absolute authority
- Strict hierarchies
- Other directed care
- Prescriptive care

**Include**
- Special knowledge and training
- Acceptance
- Development of skills
- Honoring past experience
- Caring, compassion and collaboration
- The belief that a meaningful life is possible for all people.

"The medical model treats me like a disease; the recovery model treats me like a person."

Posted on December 5, 2007 by recoverysupport
Shift in Focus:
Things to be Recovered

- **Functions** may be recovered - as in the ability to read, to sleep restfully, to work, to have coherent conversations, to make love, to raise children, to drive a car, etc.
- **External Things** may be recovered - as in an apartment, a job, friends, playing in a band, a spouse, a car, family relationships, stereo, tv, educational programs, etc.
- **Internal States** can be recovered - as in feeling good about oneself, satisfaction, self-confidence, spiritual peace, self-identity other than mentally ill, self-responsibility etc. (Ragins)

“The language of the helping professions reveals in an especially stark way that perception of the same act can range all the way from one pole to its opposite.”
(Edelman, 1974)

Step Three:
The Impact of Language

- Language is a distinctive characteristic of human beings.
  - Describes and creates our own realities (Edelman, 1974)
- Basic means of communicating with one another.
- A way to change thinking and attitudes

Hospital staff often deny or ignore the requests of angry mental health patients because to grant them would “reinforce deviant behavior.”

Words Can Establish Control & Dis-Empower

- Using words that are unfamiliar and technical
- Using acronyms that seem to be a secret code
- Using unexplained scientific terms
- Using pejorative references to individuals

The Focus:
The Components of Recovery

- A Meaningful Life
- Self-Responsibility
- Connectivity
- Empowerment
- Hope
Step Four: Introduction to Recovery

- Review the five components of recovery with staff members.
  - Allow them to process each concept in a round table discussion.
  - Reinforce their attempt to process their stories and examples.
  - Remind them of behaviors, interactions, and interventions they often utilize in their professional practice.
  - Discuss the value of each component.

HOPE

How do you inspire hope in your patients?
- How do you communicate hope?
- How do you show them the light when they can’t see it?
- What image of hope do you instill?

EMPOWERMENT

How do you empower your patients to take control of their recovery?
- Believe in their abilities
- Focus on strengths
- Help them experience success

SELF RESPONSIBILITY

How do you encourage and support patients to take charge of their recovery?
- Help them own their behaviors
- Encourage personal goal setting
- Eliminate dependency
- Build confidence

CONNECTEDNESS

How do you assist patients in reconnecting with the community and community resources?
- A source of resources in your community
- Explores recovery
- Acts on personal resources

A MEANINGFUL LIFE

What does a meaningful life look like for patients in your care?
What gives your life meaning?
“Words are important. If you want to care for something you call it a flower; if you want to kill something you call it a weed.”

Don Coyhis

Step Five:
Reflection, Insight and Change

The Gallery Walk
- Divide group into 4-5 individuals
- Post three flip chart papers onto the wall
- Give each staff member multiple post-its.
- Initial focus is on Non-Recovery focused terminology offered used or heard, i.e. report, rounds, nursing station, treatment team, etc.
- Ask them to write down as many answers as they desire

Language Alternatives
- Crisis → Intensity
- Decompensating → Having a bad day
- Non-compliant → Different opinion
- Low functioning → Experiencing difficulty
- High functioning → Smart and capable
- Appropriate/inappropriate → Not working for you......
- Issues → Learning more about her illness
- Lack of insight → Fear of the unknown

Step Six:
Internalizing Recovery

- Handout with Summary
- Rock
- Shell

What Now?
Promote a Recovery Based Environment

- Facility/program based on recovery principles
- Encourage individual personal commitment to recovery
- Utilize recovery focused language
- Promote the use of recovery tools
- Embrace patient centered care
- Listen to the voice of the patient
- Seek patient collaboration in treatment planning
- Develop recovery outcome measures
- Continually assess, evaluate, adjust to the needs of the patient
Questions to Ask: Saturation

- Are the programs saturated with recovery principles and values?
  - Policies
  - Procedures
  - Programming
  - Language
  - Attitudes: Does everyone believe in the value of the model?

“Recovery is not about cure or absence of symptoms; yet it is about empowering individuals to lead long fulfilling lives in spite of symptoms as well as learning to develop a meaningful life”

References


Questions?

References